Case 19-17387 Doc 1 Filed 05/31/19 Page 1 of 51

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF MARYLAND		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only i	n a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for	Angela First name	First name	
	example, your driver's	Christine		
	license or passport).	Middle name	Middle name	
	Bring your picture identification to your meeting with the trustee.	Swann Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II,	III)
2.	All other names you have used in the last 8 years	•		
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9501		

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs		
5.	Where you live	2230 Stream Vista, #302	If Debtor 2 lives at a different address:		
		Waldorf, MD 20601 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Charles			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition,	Check one: ☐ Over the last 180 days before filing this petition, I		
		I have lived in this district longer than in any other district.	have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Case 19-17387 Doc 1 Filed 05/31/19 Page 3 of 51

Der	Angela Chinstine 3	owaiiii				Case	idilibei (ii kilowii)	
Par 7.					ich soo Notice Re	guirod by 11 I I S	C & 242/h) for Individu	uals Filing for Bankruptcy
1.	The chapter of the Bankruptcy Code you are			go to the top of page			.C. § 342(b) 101 IIIdividi	iais Filling for Barikrupicy
	choosing to file under	■ Chap	ter 7					
		☐ Chap	ter 11					
		☐ Chap	ter 12					
		☐ Chap	ter 13					
8.	How you will pay the fee	ab ord a p	out how your ler. If your pre-printed	ou may pay. Typically attorney is submitting address.	r, if you are paying g your payment on	the fee yourself, your behalf, you	you may pay with cash ir attorney may pay with	local court for more details, cashier's check, or money a credit card or check with
		Th	e Filing Fe	ee in Installments (Off	ficial Form 103A).			·
		bu ap	t is not req plies to yo	uired to, waive your f ur family size and you	ee, and may do so are unable to pay	only if your inco	me is less than 150% o	ter 7. By law, a judge may, of the official poverty line that his option, you must fill out your petition.
9.	Have you filed for	□ No.						
	bankruptcy within the last 8 years?	Yes.						
	•		District	mdbke	When	5/22/10	Case number	10-21547
			District		When		Case number	
			District		When		Case number	
10.	Are any bankruptcy cases pending or being filed by a spouse who is	■ No						
	not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor				Relationship to y	ou
			District		When		Case number, if	known
			Debtor				Relationship to y	
			District		When		Case number, if	known
11.	Do you rent your	□ No.	Go to I	ine 12.				
	residence?	Yes.	Has yo	our landlord obtained	an eviction judgme	ent against you?		
				No. Go to line 12.				
				Yes. Fill out <i>Initial</i> S bankruptcy petition.	Statement About an	Eviction Judgme	ent Against You (Form	101A) and file it with this

Case 19-17387 Doc 1 Filed 05/31/19 Page 4 of 51

Deb	otor 1 Angela Christine	Swann		Case number (if known)	
Par	t 3: Report About Any Bu	sinesses	You Own as a Sole Propri	etor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.		
		☐ Yes.	Name and location of b	usiness	
	A sole proprietorship is a				
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if an		
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, St	ate & ZIP Code	
	it to this petition.		Check the appropriate to	pox to describe your business:	
			☐ Health Care Bus	siness (as defined in 11 U.S.C. § 101(27A))	
			☐ Single Asset Re	al Estate (as defined in 11 U.S.C. § 101(51B))	
			☐ Stockbroker (as	defined in 11 U.S.C. § 101(53A))	
			☐ Commodity Brol	xer (as defined in 11 U.S.C. § 101(6))	
			☐ None of the about	ve	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation in 11 U.S	are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropri lines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statemen tions, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the proced U.S.C. 1116(1)(B).		
	For a definition of small	■ No.	I am not filing under Ch	apter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapte Code.	er 11, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.	I am filing under Chapte	er 11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Par	t 4: Report if You Own or	Have Any	Hazardous Property or A	ny Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?		
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?		
				Number, Street, City, State & Zip Code	

Debtor 1 Angela Christine Swann

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 19-17387 Doc 1 Filed 05/31/19 Page 6 of 51

Debtor 1 Angela Christine S		Swann	Swann Case number (if known)				
Par	t 6: Answer These Quest	ions for R	eporting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."				
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.	Are your debts primarily	business debts? Business debts are debts vestment or through the operation of the busi			
			☐ No. Go to line 16c.	9 1			
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you	owe that are not consumer debts or busines	s debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapt	er 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and			7. Do you estimate that after any exempt propavailable to distribute to unsecured creditors?			
	administrative expenses		■ No				
	are paid that funds will be available for		□Yes				
	distribution to unsecured creditors?						
18.	How many Creditors do you estimate that you owe?	■ 1-49		☐ 1,000-5,000	□ 25,001-50,000		
		☐ 50-99		☐ 5001-10,000	5 0,001-100,000		
		□ 100-1 □ 200-9		☐ 10,001-25,000	☐ More than100,000		
19	How much do you	□ \$0 - \$	50,000	□ ¢4 000 004	□ ¢500,000,004, ¢4 hillion		
	estimate your assets to		50,000 01 - \$100,000	☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion		
	be worth?		001 - \$500,000	□ \$50,000,001 - \$100 million	☐ \$10,000,000,001 - \$50 billion		
		□ \$500,	001 - \$1 million	☐ \$100,000,001 - \$500 million	☐ More than \$50 billion		
20.	How much do you	□ \$0 - \$	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?		01 - \$100,000	☐ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion		
			001 - \$500,000	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion		
		□ \$500,	001 - \$1 million	— \$100,000,001 - \$300 million	I Wore than \$50 billion		
Par	t 7: Sign Below						
For	you	I have ex	amined this petition, and I d	leclare under penalty of perjury that the inform	nation provided is true and correct.		
				r 7, I am aware that I may proceed, if eligible, e relief available under each chapter, and I ch			
				d not pay or agree to pay someone who is no the notice required by 11 U.S.C. § 342(b).	t an attorney to help me fill out this		
		I request	relief in accordance with the	e chapter of title 11, United States Code, spec	cified in this petition.		
		bankrupt and 3571	cy case can result in fines u	nt, concealing property, or obtaining money o p to \$250,000, or imprisonment for up to 20 y			
			ela Christine Swann Christine Swann	Signature of Debtor	r 2		
			e of Debtor 1	- 			
		Executed	May 31, 2019	Executed on			
			MM / DD / YYYY	MM	/ DD / YYYY		

Case 19-17387 Doc 1 Filed 05/31/19 Page 7 of 51

Debtor 1 Angela Christine	Swann
---------------------------	-------

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Mary Sue Greisman	Date	May 31, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
Mary Sue Greisman 06994		
Printed name		
Law Office of Mary Sue Greisman Firm name		
2670 Crain Hwy Ste 525 Waldorf, MD 20601		
Number, Street, City, State & ZIP Code		
Contact phone 301-870-5417	Email address	Marysue@greismanlaw.com
06994 MD		
Bar number & State		

Case 19-17387 Doc 1 Filed 05/31/19 Page 8 of 51

Fill	in this information to identify your case:		
Deb	otor 1 Angela Christine Swann		
Det	First Name Middle Name Last Name		
	use if, filing) First Name Middle Name Last Name		
Uni	ted States Bankruptcy Court for the: DISTRICT OF MARYLAND		
	se numberown)	_	k if this is an
		amen	ded filing
Su	ficial Form 106Sum mmary of Your Assets and Liabilities and Certain Statistical Information s complete and accurate as possible. If two married people are filing together, both are equally responsible for		12/15
	rmation. Fill out all of your schedules first; then complete the information on this form. If you are filing amendo original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.	ed schedu	lles after you file
Par	1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	365,125.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	54,572.56
	1c. Copy line 63, Total of all property on Schedule A/B	\$	419,697.56
Par	2: Summarize Your Liabilities		
			abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	232,537.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	51,572.00
	Your total liabilities	\$	284,109.00
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,851.34
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,783.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this the court with your other schedules.	box and s	ubmit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Case 19-17387 Doc 1 Filed 05/31/19 Page 9 of 51

Debtor 1 Angela Christine Swann

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

6,246.52

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	34,371.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	34,371.00

	C	ase 19-1730) / L	JOC I F	ileu 05/3 i/ 19	Page 10 0	101	
Fill in this in	nformation to identify	your case and th	is filing	g:			1	
Debtor 1	Angela Chri	stine Swann						
	First Name	Middle	Name		Last Name			
Debtor 2 (Spouse, if filing) First Name	Middle	Name		Last Name			
United State	s Bankruptcy Court for	the: DISTRICT	OF MA	RYLAND				
Case number	er				_			☐ Check if this is an amended filing
Official	Form 106A/E	3						
Sched	lule A/B: P	roperty						12/15
think it fits be information. If Answer every	st. Be as complete and more space is needed, question.	accurate as possibl attach a separate sh	e. If two neet to t	married peopl his form. On th	an asset fits in more than le are filing together, both ne top of any additional po-	are equally res	ponsible for su	pplying correct
□ No. Go t		quitable interest in a	ny resic	lence, building	, land, or similar property	?		
1.1			Wha	is the propert	y? Check all that apply			
	Swann Gate Place		•	Single-family		Do not de	duct secured cla	ims or exemptions. Put
Street ad	dress, if available, or other de	scription		Duplex or mu	Ilti-unit building n or cooperative	the amour	nt of any secured	d claims on Schedule D: ns Secured by Property.
Hughe	esville MD	20637-0000 ZIP Code		Land	d or mobile home	entire pro	alue of the operty?	Current value of the portion you own? \$365,125.00
City	State	ZIF Code		Investment programmer Investment programmer Timeshare Other	горену	Describe	the nature of ye	our ownership interest
			_		et in the property? Check or	a life esta	fee simple, tena ite), if known. vner with ex	-husband
Charle	es			Debtor 2 only	,			
County					Debtor 2 only of the debtors and another		ck if this is com	munity property
			Othe		ou wish to add about this	,	,	
			Mr. Zillo	Cooper/sur	husband Paul Swar render 95.00 value Minus 1			
2. Add the	dollar value of the po	ortion you own fo	r all of	your entries	from Part 1, including	any entries fo	r	# 005 405 00
								\$365,125.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Case 19-17387 Doc 1 Filed 05/31/19 Page 11 of 51

Debtor 1	Angela Christine Swann	C	Case number (if known)	
3. Cars, vans	s, trucks, tractors, sport utility ve	ehicles, motorcycles		
□ No				
■ Yes				
- 163				
3.1 Make:	Honda	Who has an interest in the property? Check one	the amount of any secure	laims or exemptions. Put ed claims on Schedule D:
Model:	Ridgeline	Debtor 1 only	Creditors Who Have Cla	ims Secured by Property.
Year:	2006 imate mileage: 180,000	Debtor 2 only	Current value of the entire property?	Current value of the
	nformation:	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	portion you own?
	ion: 2230 Stream Vista,	At least one of the debtors and another		
	Waldorf MD 20601	☐ Check if this is community property (see instructions)	\$2,568.00	\$2,568.00
	ribe Your Personal and Household It or have any legal or equitable in	tems nterest in any of the following items?		Current value of the
				portion you own? Do not deduct secured claims or exemptions.
	d goods and furnishings Major appliances, furniture, linens escribe	s, china, kitchenware		
	LivingRoom: Sofa = \$50; cof	fee tables and end tables-\$50; lamps \$20;		\$120.00
	BedRoom			
		n, king) - = \$200		
	Dresser - = \$20 Chest of Drawe			
	Armoire = \$200			
	Night Stand = \$			
	Bedroom Set =			
	Lamps = \$5			
	Other - = n/a			64 005 04
	Total: \$1,005			\$1,005.00

	Case 19-17387	Doc 1	Filed 05/31/19	Page 12 of 51	
Debtor 1	Angela Christine Swann			Case number (if known)	
	Kithchen-Dining Stove - = n/a Fridge - = n/a Freezer = n/a Dishwasher - = n/a Microwave - = n/a Pots & Pans - = n/a Dishes - = \$10 Table/Chairs - = \$30 DiningRoomSet - = \$30 Other - = n/a				
	Total: \$70				\$70.00
	Garage-Utility-Misc: Washer - = n/a Dryer - = n/a Mower - = n/a Gas Powered Tools - = 1 Electric Tools - = \$20 Tools & Tool Boxes, etc Vacuum - = \$10 Desk - = n/a Patio Furniture = \$10 Other- = n/a Total: \$60				\$60.00
	Totali you				·
□ No	es: Televisions and radios; audio, video, stereo, including cell phones, cameras, media played Describe Electronics Camera/Camcorder/GoF TV = \$100 DVD Player(s) / DVDs = IPAD-IPOD-Tablets = \$1 Entertainment/Stereo Sy Computer/Laptop = \$500 Printer = \$80 Smart Phone = (value ar Fitbit, Exec monitors etc Xbox-PlayStation-Wii et Other = n/a	Pro = n/a \$20 0 ystem = n/0 nd amount	<i>'</i> a	orinters, scanners; music collect	ions; electronic devices
	bles of value es: Antiques and figurines; paintings, prints, or o other collections, memorabilia, collectibles	other artworl	k; books, pictures, or oth	er art objects; stamp, coin, or ba	aseball card collections;

Yes. Describe.....

Baby Doll Collection and Barbie Doll Collection located at Debtor's mother's home at 2608 John A. Thompson Road, Temple Hills, MD 20748

\$1,500.00

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

■ No

☐ Yes. Describe.....

Case number (if known)

10. Firearms	· Diotale, rifles, shotgung, ammunitian, and related equipment	
■ No	Pistols, rifles, shotguns, ammunition, and related equipment	
☐ Yes. De	scribe	
11. Clothes Examples □ No ■ Yes. De	Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	ClothingWomen: Suits = n/a Blazer = n/a Pants- Dressy/Casual/Jeans = \$10 Blouse- Dressy/Casual = \$50 Shirts- Dressy/Casual = \$100 Dresses = \$20 Skirts = \$50 Shoes = \$100 Sweater(s) = \$10 Coat(s) = \$300 Purses = \$500 Other (describe) = n/a	\$1,140.00
12. Jewelry Examples □ No ■ Yes. De	Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, scribe	gold, silver
	Pandora Charms	\$200.00
	JEWELRY: Watch - = \$100 Wedding Bands - = n/a Rings - = \$100 Bracelets - = \$100 Necklace - = \$100 Earrings - = \$50 CostumeJewelry - = \$10 Other - = n/a	
	Total: \$460	\$460.00
■ No □ Yes. De 14. Any other ■ No	Dogs, cats, birds, horses	
	dollar value of all of your entries from Part 3, including any entries for pages you have attached B. Write that number here	\$5,265.00
	pe Your Financial Assets or have any legal or equitable interest in any of the following?	Current value of the

Official Form 106A/B Schedule A/B: Property

Debtor 1

Angela Christine Swann

page 4

portion you own?
Do not deduct secured

Case 19-17387 Doc 1 Filed 05/31/19 Page 14 of 51

De	ebtor 1	Angela Christine Swann	Case number (if known)	
			-	claims or exemptions.
16.	□ No ´		ome, in a safe deposit box, and on hand when you file your petition	
	Yes		Cash in wallet	
			etc	\$75.00
17.		ts of money les: Checking, savings, or other financial accounts	punts; certificates of deposit; shares in credit unions, brokerage hous with the same institution, list each.	ises, and other similar
	_		Institution name:	
	res		Wells Fargo Checking \$2.85 Checking \$1 Checking with Daughter \$26.85	
		17.1.	Savings with Daughter \$1	\$31.70
			Cedar Point Federal Credit Union Checking	
		17.2.	Savings sole	\$1,821.29
	Non-pul joint ve ■ No □ Yes.		orated and unincorporated businesses, including an interest in % of ownership:	n an LLC, partnership, and
20.	Negotia Non-ne ■ No	able instruments include personal checks, cas	shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them.	
21.	Example No	nent or pension accounts les: Interests in IRA, ERISA, Keogh, 401(k), 4 List each account separately.	103(b), thrift savings accounts, or other pension or profit-sharing pla	ns
	— 163. L	Type of account:	Institution name:	
			TSP through employment	\$42,811.57
22.	Your sh	y deposits and prepayments nare of all unused deposits you have made so les: Agreements with landlords, prepaid rent,	o that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companies	s, or others
	_		Institution name or individual:	
23.	Annuitie	es (A contract for a periodic payment of mone	ey to you, either for life or for a number of years)	
	■ No □ Yes	Issuer name and description.		

Case 19-17387 Doc 1 Filed 05/31/19 Page 15 of 51

Debtor 1	Angela Christine Swann	1	Case number (if known)	
26 U.S	sts in an education IRA, in an S.C. §§ 530(b)(1), 529A(b), and §		ogram, or under a qualified state tuition prog	ram.
■ No □ Yes	Institution name	and description. Separately file the	ne records of any interests.11 U.S.C. § 521(c):	
■ No			g listed in line 1), and rights or powers exerc	isable for your benefit
	. Give specific information about		and manageria.	
		ade secrets, and other intellecture basites, proceeds from royalties a		
☐ Yes	. Give specific information abou	ut them		
	ses, franchises, and other ger nples: Building permits, exclusive		n holdings, liquor licenses, professional licenses	
☐ Yes	. Give specific information abou	ut them		
Money or	r property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	efunds owed to you			
■ No □ Yes	. Give specific information about	t them, including whether you alre	ady filed the returns and the tax years	
29. Famil Exan		nony, spousal support, child supp	ort, maintenance, divorce settlement, property se	ettlement
☐ Yes	. Give specific information			
<i>Exan</i> □ No	benefits; unpaid loans you	nsurance payments, disability ben	efits, sick pay, vacation pay, workers' compens	ation, Social Security
■ Yes	. Give specific information			
		ex-husband (Paul Swann). 2017, which was merged k divorce decree the followi 1. The debtor was to be pa Swann,within 4 years, in a removed from Deed to the Swann Gate Place, Hughe 2. Mr. Swann was to refinato remove the Debtor from The Debtor has not received bligor on the mortgage.	aid the sum of \$50,000 from Mr. exchange for her name being marital home located at 6840 sville, MD. ance the mortgage on this property this obligation within 2 years. ed these funds and she is still an The mortgage company has proceedings. The Debtor thinks it	\$0.00
	ests in insurance policies apples: Health, disability, or life in	surance; health savings account (HSA); credit, homeowner's, or renter's insurance	Э
■ Yes	. Name the insurance company Compar		Beneficiary:	Surrender or refund value:

Debtor 1	Angela Christine Swa	ınn	Case number (if known)		
		Insurance through employment USPS-Basic Life Insurance FEGLI	Mother and son 50/50	\$0.00	
If yo som	u are the beneficiary of a living eone has died.	ue you from someone who has died g trust, expect proceeds from a life insurance	policy, or are currently entitled to rec	eive property because	
<i>Exa</i> . □ No	mples: Accidents, employment	ether or not you have filed a lawsuit or man t disputes, insurance claims, or rights to sue	le a demand for payment		
		In January 2019 Debtor filed for County Circuit Court. There has I has not been able to get Paul Sw is eluding service.	peen no activity because she	\$0.00	
■ No	s. Describe each claim	ed claims of every nature, including count	erclaims of the debtor and rights to	o set off claims	
□ No	financial assets you did not s. Give specific information	already list			
		Time Share at Williamsburg Plant owned with ex husband maintenance fees	ation	\$2,000.00	
		ur entries from Part 4, including any entri		\$46,739.56	
Part 5:	Describe Any Business-Related	Property You Own or Have an Interest In. List a	ny real estate in Part 1.		
37. Do yo	u own or have any legal or equit	able interest in any business-related property?			
	Go to Part 6 Go to line 38.				
	Describe Any Farm- and Comme If you own or have an interest in fa	rcial Fishing-Related Property You Own or Have rmland, list it in Part 1.	an Interest In.		
■ N	ou own or have any legal or lo. Go to Part 7. Yes. Go to line 47.	equitable interest in any farm- or commer	cial fishing-related property?		
Part 7:	Describe All Property You C	Own or Have an Interest in That You Did Not List	Above		
	mples: Season tickets, country	ny kind you did not already list? club membership			
	s. Give specific information				
54. Ad	d the dollar value of all of yo	ur entries from Part 7. Write that number I	nere	\$0.00	

Case 19-17387 Doc 1 Filed 05/31/19 Page 17 of 51

Debtor 1 Angela Christine Swann				Case number (if known)	
Part 8:	List the Totals of Each Part of this Form				
55. Pa	rt 1: Total real estate, line 2				\$365,125.00
56. Pa	rt 2: Total vehicles, line 5		\$2,568.00		
57. Pa	rt 3: Total personal and household items, line 15		\$5,265.00		
58. Pa	rt 4: Total financial assets, line 36		\$46,739.56		
59. Pa	rt 5: Total business-related property, line 45		\$0.00		
60. Pa	rt 6: Total farm- and fishing-related property, line 52		\$0.00		
61. Pa	rt 7: Total other property not listed, line 54	+	\$0.00		
62. To	otal personal property. Add lines 56 through 61		\$54,572.56	Copy personal property total	\$54,572.56
63. To	otal of all property on Schedule A/B. Add line 55 + line 62				\$419,697.56

Official Form 106A/B Schedule A/B: Property

page 8

Case 19-17387 Doc 1 Filed 05/31/19 Page 18 of 51

	Cac	0 10 11	001 0001		a coroni io il ago io c			
Fil	Il in this information to identify yo	ur case:						
De	ebtor 1 Angela Christii	ne Swann	1					
	First Name		/liddle Name	L	ast Name			
	ebtor 2 pouse if, filing) First Name	N	/liddle Name	L	ast Name			
Un	nited States Bankruptcy Court for the	e: DISTE	RICT OF MARYLAND					
	ase number					☐ Check if this is an amended filing		
	fficial Form 106C chedule C: The P	roper	rty You Cla	im	as Exempt	4/19		
the nee cas For spe any fun	property you listed on Schedule A/Is eded, fill out and attach to this page se number (if known). The each item of property you claim ecific dollar amount as exempt. All y applicable statutory limit. Some lids—may be unlimited in dollar ar	as many co as many co as exempt ternatively exemption nount. Hov	(Official Form 106A/B) popies of Part 2: Addition , you must specify the , you may claim the f is—such as those for wever, if you claim an	as yo nal Pa e amo ull fai healt exen	our source, list the property that you age as necessary. On the top of any ount of the exemption you claim. (ir market value of the property be th aids, rights to receive certain be aption of 100% of fair market valu	additional pages, write your name and One way of doing so is to state a ing exempted up to the amount of enefits, and tax-exempt retirement e under a law that limits the		
to t	the applicable statutory amount.			y is d	letermined to exceed that amount	, your exemption would be limited		
Pa	Identify the Property You	Claim as E	xempt					
1.	Which set of exemptions are you	u claiming	? Check one only, ever	n if yo	ur spouse is filing with you.			
	■ You are claiming state and fede	ral nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)			
	☐ You are claiming federal exemp	otions. 11 l	U.S.C. § 522(b)(2)					
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and Schedule A/B that lists this property		Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption		
	, , , , , , , , , , , , , , , , , , , ,		Copy the value from Schedule A/B	Che	eck only one box for each exemption.			
	6840 Swann Gate Place Hug MD 20637 Charles County	hesville,	\$365,125.00		\$4,265.71	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)		
	owned with ex-husband Pau forelcosure upcoming Mr. Cooper/surrender Zillow= \$405,695.00 value N 10% theoretical cost of sale= \$365,125.50 Line from Schedule A/B: 1.1	linus			100% of fair market value, up to any applicable statutory limit			
	2006 Honda Ridgeline 180,00 Location: 2230 Stream Vista		\$2,568.00		\$741.30	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)		
	Waldorf MD 20601 Line from Schedule A/B: 3.1	,			100% of fair market value, up to any applicable statutory limit			
	LivingRoom: Sofa = \$50; coffee tables and	lond	\$120.00	•	\$120.00	Md. Code Ann., Cts. & Jud.		
	Soia = \$50, colleg tables and	ı end				Proc. § 11-504(b)(4)		

tables-\$50; lamps \$20;

Line from Schedule A/B: 6.1

 \square 100% of fair market value, up to any applicable statutory limit

Case 19-17387 Doc 1 Filed 05/31/19 Page 19 of 51

Angela Christine Swann			Case number (if known)	=	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Check only one box for each exemption. Schedule A/B		eck only one box for each exemption.		
BedRoom Bed (full, queen, king) - = \$200	\$1,005.00		\$750.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4)	
Oresser - = \$200 Chest of Drawer = \$200 Armoire = \$200 Sight Stand = \$200 Bedroom Set = n/a .amps = \$5 Other - = n/a Total: \$1,005 ine from Schedule A/B: 6.2			100% of fair market value, up to any applicable statutory limit		
BedRoom Bed (full, queen, king) - = \$200	\$1,005.00		\$255.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)	
Dresser - = \$200 Chest of Drawer = \$200 Armoire = \$200 Night Stand = \$200 Bedroom Set = n/a Lamps = \$5 Other - = n/a Fotal: \$1,005 Line from Schedule A/B: 6.2			100% of fair market value, up to any applicable statutory limit	Proc. § 11-304(I)(I)(I)(I)	
Kithchen-Dining Stove - = n/a	\$70.00		\$70.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4)	
Fridge - = n/a Freezer = n/a Dishwasher - = n/a Microwave - = n/a Pots & Pans - = n/a Dishes - = \$10 Fable/Chairs - = \$30 DiningRoomSet - = \$30 Other - = n/a Fotal: \$70 Line from Schedule A/B: 6.3			100% of fair market value, up to any applicable statutory limit		
Garage-Utility-Misc: Nasher - = n/a	\$60.00		\$60.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4)	
Dryer - = n/a Mower - = n/a Gas Powered Tools - = n/a Electric Tools - = \$20 Fools & Tool Boxes, etc = \$20 /acuum - = \$10 Desk - = n/a Patio Furniture = \$10 Other- = n/a Fotal: \$60			100% of fair market value, up to any applicable statutory limit		

Case 19-17387 Doc 1 Filed 05/31/19 Page 20 of 51

surrent value of the ortion you own sopy the value from schedule A/B \$710.00		\$47.00 100% of fair market value, up to any applicable statutory limit	Md. Code Ann., Cts. & Jud Proc. § 11-504(f)(1)(i)(1) Md. Code Ann., Cts. & Jud Proc. § 11-504(f)(1)(i)(1)
sopy the value from chedule A/B \$710.00	•	\$47.00 100% of fair market value, up to any applicable statutory limit	Proc. § 11-504(f)(1)(i)(1) Md. Code Ann., Cts. & Jud
·	_	100% of fair market value, up to any applicable statutory limit	Proc. § 11-504(f)(1)(i)(1) Md. Code Ann., Cts. & Jud
\$710.00	_	any applicable statutory limit	Md. Code Ann., Cts. & Jud
\$710.00		\$663.00	
			Proc. § 11-504(f)(1)(1)(1)
		100% of fair market value, up to any applicable statutory limit	
\$1,500.00		\$1,500.00	Md. Code Ann., Cts. & Jud Proc. § 11-504(f)(1)(i)(1)
		100% of fair market value, up to any applicable statutory limit	1100.3 11 004(1)(1)(1)(1)
\$1.140.00	_	\$1,140.00	Md. Code Ann., Cts. & Jud
		100% of fair market value, up to any applicable statutory limit	Proc. § 11-504(f)(1)(i)(1)
\$460.00		\$460.00	Md. Code Ann., Cts. & Jud Proc. § 11-504(f)(1)(i)(1)
		100% of fair market value, up to any applicable statutory limit	
	\$1,140.00	\$1,140.00 • • • • • • • • • • • • • • • • • • •	\$1,140.00 \$1,140.00 \$100% of fair market value, up to any applicable statutory limit \$1,140.00 100% of fair market value, up to any applicable statutory limit \$460.00 100% of fair market value, up to any applicable statutory limit

Case 19-17387 Doc 1 Filed 05/31/19 Page 21 of 51

otor 1 Angela Christine Swann			Case number (if known)		
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B		ck only one box for each exemption.		
Cash in wallet etc Line from Schedule A/B: 16.1	\$75.00		\$75.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)	
			100% of fair market value, up to any applicable statutory limit		
Wells Fargo Checking \$2.85	\$31.70		\$31.70	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)	
Checking \$1 Checking with Daughter \$26.85 Savings with Daughter \$1 Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	1100. 8 11-304(1)(1)(1)	
Cedar Point Federal Credit Union Checking	\$1,821.29		\$87.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)	
Savings sole Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	1100.3 11 304()/(1)/(1/(1)	
Cedar Point Federal Credit Union Checking	\$1,821.29		\$1,734.29	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)	
Savings sole Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit		
TSP through employment Line from Schedule A/B: 21.1	\$42,811.57		\$42,811.57	Md. Code Ann., Cts. & Jud. Proc. § 11-504(h)	
Line Horri Governo V.B. 2111			100% of fair market value, up to any applicable statutory limit		
Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every ■ No	3 years after that for ca	ases fi	·		
Yes. Did you acquire the property cove No	red by the exemption w	ithin 1	215 days before you filed this case	?	
☐ Yes					

	Case	e 19-17367 DOCT Filed 05/3	51/19 Page 22	0151	
Fill in this informa	ation to identify you	r case:			
Debtor 1	Angela Christin	e Swann			
	First Name	Middle Name Last Name			
Debtor 2					
(Spouse if, filing)	First Name	Middle Name Last Name			
United States Ban	kruptcy Court for the:	DISTRICT OF MARYLAND			
Case number					
(if known)				☐ Check	if this is an
				amend	ded filing
Official Form	106D				
	-				
Schedule I	D: Creditors	Who Have Claims Secure	ed by Propert	у	12/15
		If two married people are filing together, both are out, number the entries, and attach it to this form.			
1. Do any creditors h	ave claims secured by	your property?			
☐ No. Check	this box and submit tl	nis form to the court with your other schedules.	You have nothing else	o report on this form.	
Yes. Fill in a	all of the information	below.			
Part 1: List All	Secured Claims				
		nore than one secured claim, list the creditor separate	Column A	Column B	Column C
for each claim. If mo	re than one creditor has	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
2.1 Bank of An	nerica	Describe the property that secures the claim:	value of collateral. Unknown	claim \$0.00	If any Unknown
Creditor's Name		Real Estate Specific			
		Тем. Дом. оргонно			
Attn: Bank		As of the date you file, the claim is: Check all that			
Po Box 982		apply.			
El Paso, T		Contingent			
Number, Street, 0	City, State & Zip Code	Unliquidated			
Who owes the deb	it? Check one	☐ Disputed Nature of lien. Check all that apply.			
_	ar oncor onc.	☐ An agreement you made (such as mortgage or s	ecured		
■ Debtor 1 only ■ Debtor 2 only		car loan)	Courcu		
Debtor 1 and Deb	ator 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
_	e debtors and another	☐ Judgment lien from a lawsuit			
Check if this cla	im relates to a	Other (including a right to offset)			
Date debt was incu	Opened 5/10/06 Last Active 12/20/12	Last 4 digits of account number 8562	:		

Case 19-17387 Doc 1 Filed 05/31/19 Page 23 of 51

Debtor 1 Angela Christine Swann	Case number (if known)				
First Name Middle Na	ame Last Name				
2.2 Comenitybank/Jared	Describe the property that secures the claim:	\$357.00	\$200.00	\$157.00	
Creditor's Name	Pandora Charms				
Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218	As of the date you file, the claim is: Check all that apply. Contingent				
Number, Street, City, State & Zip Code	Unliquidated				
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or scar loan)	secured			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)				
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset)				
Opened 08/17 Last Date debt was incurred Active 03/19	Last 4 digits of account number 4112	2			
2.3 Mr. Cooper	Describe the property that secures the claim:	\$232,180.00	\$365,125.00	\$0.00	
8950 Cypress Waters Blvd Coppell, TX 75019 Number, Street, City, State & Zip Code	6840 Swann Gate Place Hughesville, MD 20637 Charles County owned with ex-husband Paul Swann forelcosure upcoming Mr. Cooper/surrender Zillow= \$405,695.00 value Minus 10% theoretical cost of sale= \$365,125.50 As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
☐ Debtor 1 only ☐ Debtor 2 only	An agreement you made (such as mortgage or s car loan)	secured			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)				
At least one of the debtors and another	☐ Judgment lien from a lawsuit				
Check if this claim relates to a community debt	Other (including a right to offset)				
Date debt was incurred	Last 4 digits of account number 9880)			
Add the dollar value of your entries in Coll f this is the last page of your form, add Write that number here:	olumn A on this page. Write that number here: the dollar value totals from all pages.	\$232,537. \$232,537.			

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	Case	19-17367 DOC	i Filed 05/3	1/19 Page 24 013	01
Fill in t	his information to identify your	case:			
Debtor	1 Angela Christine	Swann			
2 0210.	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if		Middle Name	Last Name		
United 9	States Bankruptcy Court for the:	DISTRICT OF MARYL	AND		
Case nu (if known)	umber				☐ Check if this is an amended filing
Officia	al Form 106E/F				
	dule E/F: Creditors W	ho Have Unsec	ured Claims		12/15
Schedule Schedule left. Attac name and	e G: Executory Contracts and Unexp D: Creditors Who Have Claims Sec th the Continuation Page to this pag d case number (if known).	ired Leases (Official Form ured by Property. If more s e. If you have no informat	106G). Do not include space is needed, copy	any creditors with partially sec the Part you need, fill it out, nu	imber the entries in the boxes on the
Part 1:	List All of Your PRIORITY Un any creditors have priority unsecure				
_	No. Go to Part 2.	u ciainis against you:			
□ \ Part 2:		V Uneocured Claims			
	any creditors have nonpriority unsec				
_	No. You have nothing to report in this p		ourt with your other scho	edules.	
■ Y	⁄es.				
unse	all of your nonpriority unsecured claused claim, list the creditor separately one creditor holds a particular claim, li 2.	/ for each claim. For each cl	aim listed, identify what	type of claim it is. Do not list clain	ns already included in Part 1. If more
					Total claim
4.1	Allied Collection Services	Last 4 digi	ts of account number	5801	\$704.00
	Nonpriority Creditor's Name				
	Attn: Bankruptcy 3080 South Durango Drive \$	Suite 208 When was	the debt incurred?	Opened 11/18 Last Ac 09/18	ctive
	Las Vegas, NV 89117	Juile 200 Which was	the debt medited.	03/10	
-	Number Street City State Zip Code	As of the d	ate you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Conting	ent		
	Debtor 2 only	☐ Unliquio	lated		
	☐ Debtor 1 and Debtor 2 only	☐ Dispute			
	lacksquare At least one of the debtors and and	70101	NPRIORITY unsecure	d claim:	
	Check if this claim is for a comm				
	debt Is the claim subject to offset?		ons arising out of a sepa riority claims	aration agreement or divorce that	you did not
	No	☐ Debts to	pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. S	Specify Collection	Attorney Sprint	

Case 19-17387 Doc 1 Filed 05/31/19 Page 25 of 51

Debtor	1 Angela Christine Swann						
4.2	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	4574	\$4,831.00			
	Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 07/17 Last Active 03/19				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	No	☐ Debts to pension or profit-sharin	o plans, and other similar debts				
	Yes	Other. Specify Credit Card					
4.3	Comenity Bank/Overstock	Last 4 digits of account number	6299	\$1,394.00			
	Nonpriority Creditor's Name Attn: Bankruptcy		Opened 02/18 Last Active				
	Po Box 182125	When was the debt incurred?	04/19				
	Columbus, OH 43218						
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply				
	<u> </u>						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:				
	At least one of the debtors and another	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not					
	☐ Check if this claim is for a community debt						
	Is the claim subject to offset?	report as priority claims					
	■ No	Debts to pension or profit-sharing	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Charge Acc	Other. Specify Charge Account				
4.4	Comenity Bank/Victoria Secret Nonpriority Creditor's Name	Last 4 digits of account number	7007	\$421.00			
	Attn: Bankruptcy Po Box 182125	When was the debt incurred?	Opened 09/17 Last Active 04/19				
	Columbus, OH 43218 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.	715 of the date you me, the claim	o. Oncox an mat apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	No	Debts to pension or profit-sharing					
	Yes	■ Other. Specify Charge Acc	count				

Case 19-17387 Doc 1 Filed 05/31/19 Page 26 of 51

Debto	or 1 Angela Christine Swann	Case number (if known)		
4.5	Comenity Jared	Last 4 digits of account number 4112	\$357.00	
	Nonpriority Creditor's Name POB 182125	When was the debt incurred?		
	Columbus, OH 43218			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify		
4.6	Comenity OverStock	Last 4 digits of account number 6299	\$1,466.00	
7.0	Nonpriority Creditor's Name		ψ1,+00.00	
	POB 182125	When was the debt incurred?		
	Columbus, OH 43218			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
		_		
	Debtor 1 only	Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt	\square Obligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify		
4.7	Comenity Pink	Last 4 digits of account number 7007	\$450.00	
	Nonpriority Creditor's Name	When was the debt incurred?		
	POB 182125 Columbus, OH 43218	when was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
		Student loans		
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	Other. Specify		
		opour,		

Case 19-17387 Doc 1 Filed 05/31/19 Page 27 of 51

Debto	or 1 Angela Christine Swann						
4.8	Neibauer Dental Care-Waldorf	Last 4 digits of account number	3259	\$178.00			
	Nonpriority Creditor's Name 117 St. Patricks Drive	When was the debt incurred?					
	Waldorf, MD 20603 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only						
	☐ At least one of the debtors and another	□ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Type of NONPRIORITY unsecured claim:					
		☐ Student loans	a Gain.				
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims	and the state of t				
	No	Debts to pension or profit-sharing	ng plans, and other similar debts				
	Yes	Other. Specify					
4.9	Nelnet	Last 4 digits of account number	9924	\$33,500.00			
	Nonpriority Creditor's Name Attn: Claims Po Box 82505	When was the debt incurred?	Opened 09/08 Last Active 03/19				
	Lincoln, NE 68501	As of the date you file, the claim					
	Number Street City State Zip Code Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	′	☐ Disputed					
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:				
	☐ At least one of the debtors and another	Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	☐ Debts to pension or profit-shari					
	☐ Yes	Other. Specify					
	163	Education	 1l				
			-				
4.1 0	NeInet Nonpriority Creditor's Name	Last 4 digits of account number	0636	\$871.00			
	Attn: Claims Po Box 82505	When was the debt incurred?					
	Lincoln, NE 68501 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-shari	ng plans, and other similar debts				
	□ Yes	Other. Specify					
	35	Education:	al				

Case 19-17387 Doc 1 Filed 05/31/19 Page 28 of 51

Debto	Angela Christine Swann	Case number (if known)			
4.1	Synchrony Bank/Care Credit	Last 4 digits of account number	4859	\$1,514.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896	When was the debt incurred?			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Charge Acc	count		
4.1	Wells Fargo Bank NA Nonpriority Creditor's Name	Last 4 digits of account number	4424	\$1,886.00	
	Attn: Bankruptcy 1 Home Campus Mac X2303-01a Des Moines, IA 50328	When was the debt incurred?	Opened 06/18 Last Active 04/19		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Bobs Furni	ture		
4.1	Williamsburg Plantation TimeShare Nonpriority Creditor's Name	Last 4 digits of account number		\$4,000.00	
	4870 Longhill Rd Williamsburg, VA 23188	When was the debt incurred?			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify maintenance	ce fees		

Part 3: List Others to Be Notified About a Debt That You Already Listed

Official Form 106 E/F

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Case 19-17387 Doc 1 Filed 05/31/19 Page 29 of 51

Debtor 1	Angela Christine Swann	Case number (if known)				
Name and Address Diversified Ajustment 600 Coon Rapids Blvd Minneapolis, MN 55433		On which entry in Part 1 or Part 2 d Line 4.1 of (<i>Check one</i>):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims			
			■ Part 2: Creditors with Nonpriority Unsecured Claims			
wiiiiiica	pons, wit 33433	Last 4 digits of account number	9088			
Name and	l Address	On which entry in Part 1 or Part 2 did you list the original creditor?				
Sprint Headquarters		Line 4.1 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
-	orint Parkway nd Park, KS 66251		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Overial	iu Faik, NS 00231	Last 4 digits of account number	7440			

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
6a.	Domestic support obligations	6a.	\$	0.00
6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				Total Claim
6f.	Student loans	6f.	\$	34,371.00
6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	17,201.00
6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	51,572.00
	6b. 6c. 6d. 6e. 6f. 6g. 6h.	 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 	6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 6e. Total Priority. Add lines 6a through 6d. 6e. 6f. Student loans 6f. 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 6d. 6d. 6d. 6d. 6d. 6e.	6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$ 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6f. \$ 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 8 65

Case 19-17387 Doc 1 Filed 05/31/19 Page 30 of 51

Fill in this information to identify your case:						
Debtor 1	Angela Christine	Swann				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		DISTRICT OF MARYLAND				
Case number						
(if known)				☐ Check	if this is	
				amendo	ed filing	

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Р	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Abberly Square Apartments 2350 Edenwoods Dr Waldorf, MD 20601	residential lease ends 9/2020
2.2	Comcast Corporation Comcast Center-Company HQ 1701 JFK Blvd Philadelphia, PA 19103	cable/internet/land line contract ends in May or June 2019
2.3	Comcast Corporation (Xfinity Mobile) Comcast Center-Company HQ 1701 JFK Blvd Philadelphia, PA 19103	cell phone contract ends August 2020

Case 19-17387 Doc 1 Filed 05/31/19 Page 31 of 51

FIII IN tr	nis information to identify your	case:				
Debtor 1	71119010 01111011110	Angela Christine Swann				
Debtor 2	First Name	Middle Name	Last Name			
(Spouse if,		Middle Name	Last Name	_		
United S	States Bankruptcy Court for the:	DISTRICT OF MARYLA	ND			
Case nu	ımher					
(if known)					Check if this is an amended filing	
Offici	al Form 106H					
Sche	dule H: Your Cod	ebtors			12/15	
people a fill it out your nar	, and number the entries in the ne and case number (if known)	ally responsible for supp boxes on the left. Attach Answer every question.	lying correct information the Additional Page to	on. If more space is n this page. On the to	ate as possible. If two married leeded, copy the Additional Page, p of any Additional Pages, write	
1. D	o you have any codebtors? (If	you are filing a joint case, c	do not list either spouse a	s a codebtor.		
Y	'es					
	/ithin the last 8 years, have you ona, California, Idaho, Louisiana,					
	Io. Go to line 3.					
ΠY	es. Did your spouse, former spou	use, or legal equivalent live	with you at the time?			
					g with you. List the person showr	
For					he creditor on Schedule D (Officia Schedule E/F, or Schedule G to fi	
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:	
3.1				☐ Schedule D, li	ine	
				☐ Schedule E/F		
				☐ Schedule G _		
3.2	Paul Swann			☐ Schedule D, li	ine	
	P.O. Box 47 Hughesville, MD 20637			■ Schedule E/F	, line <u>4.13</u>	
	riugilesville, ind 20007			☐ Schedule G _ Williamsburg Pl	lantation TimeShare	
3.3	Paul Swann			-		
ა.ა	P.O. Box 47			■ Schedule D, li		
	Hughesville, MD 20637			□ Schedule E/F□ Schedule G		
				Mr. Cooper		

Fill	in this information to identify your c	ase:			I			
Del	btor 1 Angela Chri	stine Swann						
	btor 2 puse, if filing)							
Uni	ited States Bankruptcy Court for the	: DISTRICT OF MARYL	LAND					
	se number nown)		-				ed filing ent showing po	estpetition chapter
\cap	fficial Form 106I				_		as of the follov	ving date:
	chedule I: Your Inc	omo			N	/IM / DD/ Y	YYY	12/1
sup spo atta	as complete and accurate as pos- plying correct information. If you use. If you are separated and you ch a separate sheet to this form.	are married and not filing wi	ng jointly, and your spou ith you, do not include in	use is liv nformati	ing with on abou	you, inclution your sport	ude informationse.	on about your space is needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filing	spouse
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed□ Not employed			☐ Emplo	•	
	employers.	Occupation	Window Clerk					
	Include part-time, seasonal, or self-employed work.	Employer's name	United States Posta	al Servi	ce			
	Occupation may include student or homemaker, if it applies.	Employer's address	15485 Prince Frede Hughesville, MD 20		ad			
		How long employed to	here? 21 years			_		
Pa	rt 2: Give Details About Mor	nthly Income						
	imate monthly income as of the duse unless you are separated.	ate you file this form. If y	you have nothing to repor	t for any	line, write	e \$0 in the	space. Include	e your non-filing
	ou or your non-filing spouse have mee space, attach a separate sheet to		ombine the information for	all emplo	oyers for	that perso	on on the lines	below. If you need
					For De	btor 1	For Debtor	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2. \$	6	,145.40	\$	N/A
3.	Estimate and list monthly overt	ime pay.		3. +\$		0.00	+\$	N/A

4. Calculate gross Income. Add line 2 + line 3.

4. \$ 6,145.40

N/A

Case 19-17387 Doc 1 Filed 05/31/19 Page 33 of 51

Debt	or 1	Angela Christine Swann	_	C	Case number (<i>if kr</i>	nown)				
					For Debtor 1			Debtor		
	Cop	y line 4 here	4.		\$ 6,145	5.40	\$		N/A	_
_										_
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a		\$ 1,299		\$		N/A	_
	5b.	Mandatory contributions for retirement plans	5b			2.30	\$_		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.			3.65	\$_		N/A	_
	5d. 5e.	Required repayments of retirement fund loans Insurance	5d. 5e.			5.00	\$ \$		N/A	_
	5f.	Domestic support obligations	5f.			3.22 0.00	\$ 		N/A N/A	_
	5g.	Union dues	5g.		·).39	\$_		N/A	_
	5h.	Other deductions. Specify:	5h		:	0.00	· : —		N/A	_
6		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		·——•		\$			_
6. 7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$ 2,294 \$ 3,851		»_ \$		N/A N/A	_
			٧.		Ψ <u>3,65</u>	.34	Ψ_		IN/A	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a		\$	0.00	\$		N/A	
	8b.	Interest and dividends	8b			0.00	\$ 		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent		•	Ψ		Ψ		IVA	_
		regularly receive Include alimony, spousal support, child support, maintenance, divorce	8c.		\$ (¢		NI/A	
	8d.	settlement, and property settlement. Unemployment compensation	8d.		·	0.00	\$ \$		N/A N/A	
	8e.	Social Security	8e		·	0.00	\$-		N/A	_
	8f.	Other government assistance that you regularly receive			*		–		14/74	_
		Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$	0.00	\$		N/A	
	8g.	Pension or retirement income	_ 8g		·	0.00	\$		N/A	_
	8h.	Other monthly income. Specify:	8h			0.00	+ \$		N/A	_
				Н						- ¬
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	<u> </u>	0.00	\$		N/A	A
10.	Cald	culate monthly income. Add line 7 + line 9.	10.	\$	3,851.34	+ \$		N/A	= \$	3,851.34
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	L		•	_				,
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00										
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies						12.	\$	3,851.34
									Combi month	ned ly income
13.		you expect an increase or decrease within the year after you file this form	?							
		No. Yes Eynlain								

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	tion to identify yo	our case:			l				
	otor 1	Angela Chris		ann		Chec	k if this is:			
		Angela Office	Stille Owe	21111			An amended filing			
	otor 2 ouse, if filing)							wing postpetition chapter the following date:		
Unit	ted States Bankr	ruptcy Court for the	: DISTRI	CT OF MARYLAND		MM / DD / YYYY				
	e number nown)									
0	fficial Fo	rm 106J								
		J: Your	Exper	nses				12/15		
Be	as complete a	and accurate as	possible eded, atta	. If two married people ar ich another sheet to this						
Par		ibe Your House	hold							
1.	Is this a joir No. Go to									
			in a separ	ate household?						
	□ N □ Y	-	st file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of Debt	or 2.			
2.	Do you have	e dependents?	□ No							
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?		
	Do not state dependents				Daughter		16	□ No ■ Yes □ No □ Yes □ No □ Yes		
								□ No □ Yes		
3.	expenses of	oenses include f people other t d your depende	han $_{oldsymbol{\sqcap}}$	No Yes				Li res		
Est	imate your ex		our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp						
the		h assistance an		government assistance i luded it on <i>Schedule I:</i> \			Your exp	enses		
4.		or home owners		ses for your residence. I	nclude first mortgag	e 4. \$		1,834.00		
	If not includ	led in line 4:								
		estate taxes				4a. \$		0.00		
	•	rty, homeowner's				4b. \$		40.00		
		maintenance, re owner's associat	•	upkeep expenses dominium dues		4c. \$ 4d. \$		10.00 0.00		
5.				our residence, such as ho	me equity loans	5. \$		0.00		

Case 19-17387 Doc 1 Filed 05/31/19 Page 35 of 51

Debtor 1	Angela C	Christine Swann	Case num	nber (if known)					
1 1471	ition.		_						
. Utili 6a.	ities:	heat, natural gas	6a.	¢	200.00				
		_	6b.	·					
6b.		ver, garbage collection		·	45.00				
6c.	•	e, cell phone, Internet, satellite, and cable services	6c.		358.00				
6d.	Other. Spe		6d.	·	0.00				
		ekeeping supplies	7.	*	500.00				
		hildren's education costs	8.		0.00				
	-	ry, and dry cleaning	9.	·	100.00				
). Pers	sonal care p	roducts and services	10.	\$	95.00				
. Med	dical and de	ntal expenses	11.	\$	85.00				
	nsportation. not include ca	Include gas, maintenance, bus or train fare.	12.	\$	250.00				
		clubs, recreation, newspapers, magazines, and boo	oks 13.	\$	100.00				
		ributions and religious donations	14.		0.00				
	irance.		17.	7	0.00				
		surance deducted from your pay or included in lines 4	or 20.						
	. Life insura	, , ,	15a.	\$	0.00				
	. Health ins		15b.		0.00				
	. Vehicle ins		15c.	·	150.00				
		rance. Specify:	15d.	·	0.00				
		clude taxes deducted from your pay or included in lines		Ψ	0.00				
Spe	cify:		16.	\$	0.00				
		ease payments: ents for Vehicle 1	17a.	\$	0.00				
		ents for Vehicle 2	17b.	·	0.00				
	. Other. Spe	acify.	17c.		0.00				
	. Other. Spe		176. 17d.	·	0.00				
	•	of alimony, maintenance, and support that you did		Ψ	0.00				
		your pay on line 5, <i>Schedule I, Your Income</i> (Officia		\$	0.00				
		s you make to support others who do not live with y		\$	0.00				
	cify:	,	19.		<u> </u>				
		erty expenses not included in lines 4 or 5 of this for							
		on other property	20a.		0.00				
	. Real estat		20b.	\$	0.00				
		nomeowner's, or renter's insurance	20c.	·	0.00				
		ce, repair, and upkeep expenses	20d.		0.00				
		er's association or condominium dues	20d. 20e.	·	0.00				
				+\$					
. Oth	er: Specify:	Online Subscriptions	21.	+φ	16.00				
. Calo	culate your i	monthly expenses							
22a.	. Add lines 4	through 21.		\$	3,783.00				
22b.	. Copy line 2:	2 (monthly expenses for Debtor 2), if any, from Official	Form 106J-2	\$					
		a and 22b. The result is your monthly expenses.		\$	3,783.00				
44 0.	. , luu IIIIE 220	a and 225. The result is your monthly expenses.			3,103.00				
3. Calo	culate your i	monthly net income.							
23a.	. Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	3,851.34				
23b.	. Copy your	monthly expenses from line 22c above.	23b.	-\$	3,783.00				
					·				
23c.		our monthly expenses from your monthly income. is your <i>monthly net income</i> .	23c.	\$	68.34				
		,		- (
	Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a								
		iu expect to finish paying for your car loan within the year or do terms of your mortgage?	you expect your mongage	payment to more	ase of decrease because of a				
		Simo S. Jour Mongago.							
		[=							
□ Y	res.	Explain here:							

Fill in this informa	ation to identify your	case:							
Debtor 1	Angela Christine								
	First Name	Middle Name	Last Name						
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name						
United States Bank	kruptcy Court for the:	DISTRICT OF MARYLAND							
Case number (if known)				☐ Check if this is an amended filing					
Official Form	106Dec								
Declaration	on About a	n Individual De	btor's Schedules	12/15					
obtaining money o years, or both. 18 l		connection with a bankruptc	nended schedules. Making a false sta y case can result in fines up to \$250,						
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?									
■ No									
☐ Yes. Na	Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)								
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.									
X /s/ Ange	la Christine Swann		x						
Angela C	Christine Swann of Debtor 1		Signature of Debtor 2						
Date Ma	ay 31, 2019		Date						

-HII	in this inform	ation to identify you	r c250.			
Dei	otor 1	Angela Christine	Middle Name	Last Name		
1	otor 2 buse if, filing)	First Name	Middle Name	Last Name		
` '						
Uni	ted States Ban	kruptcy Court for the:	DISTRICT OF MARYLAN	טו		
	se number				_	Check if this is an amended filing
	ficial For		Affairs for Indivic	duals Filing for B	ankruptcy	4/19
info	rmation. If mo		ible. If two married people a attach a separate sheet to stion.			
Pai	t 1: Give De	etails About Your Ma	arital Status and Where You	Lived Before		
1.	What is your	current marital statu	ıs?			
	☐ Married					
	■ Not marr	ied				
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
	□ No					
	Yes. List	all of the places you I	lived in the last 3 years. Do no	ot include where you live now	<i>1</i> .	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there
	Apartment Waldorf, M	on Promenade Pla D 20602	ace From-To:	☐ Same as Debtor	I	☐ Same as Debtor 1 From-To:
3. state	■ No □ Yes. Mal	es include Arizona, Ca	ver live with a spouse or legulifornia, Idaho, Louisiana, Newheeling Herman, Newheeling Herman, Newhole Herman	vada, New Mexico, Puerto R		
4.	Fill in the total	amount of income yo	mployment or from operating the received from all jobs and a have income that you receive	all businesses, including part	time activities.	ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$30,727.12	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

De	btor 1	An	gela Chris	tine Swan	n		Cas	se number (if known)		
					Debtor 1			Debtor 2		
					Sources of income Check all that apply.		income deductions and ons)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
			dar year: December 3	31, 2018)	☐ Wages, commissions, bonuses, tips		\$62,238.02	☐ Wages, combonuses, tips	ımissions,	
					☐ Operating a business			☐ Operating a	business	
			dar year bef December 3		☐ Wages, commissions, bonuses, tips		\$59,156.00	☐ Wages, combonuses, tips	nmissions,	
					☐ Operating a business			☐ Operating a	business	
	winr	nings. each s No	f you are fili	ng a joint cas	pensions; rental income; interest and you have income that you have from each source separa	you receive	ed together, list it	only once under D	ebtor 1.	u yambiing and lottery
					Debtor 1			Debtor 2		
					Sources of income Describe below.	each s	deductions and	Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3:	List	Certain Pa	ments You	Made Before You Filed for	Bankrupto	;y			
6.	Are either Debtor 1's or Debtor 2's debts primarily con No. Neither Debtor 1 nor Debtor 2 has primarily individual primarily for a personal, family, or he During the 90 days before you filed for bankru					umer debt ld purpose				1(8) as "incurred by an
			□ No. □ Yes * Subject t	paid that cre not include	each creditor to whom you pai editor. Do not include paymer payments to an attorney for th t on 4/01/22 and every 3 year	nts for dom his bankru	estic support obli otcy case.	gations, such as ch	nild support a	nd alimony. Also, do
		Yes.			r both have primarily consure you filed for bankruptcy, di			al of \$600 or more?	?	
			■ No.	Go to line 7						
			☐ Yes	include pay	each creditor to whom you pai ments for domestic support o this bankruptcy case.					
	Cre	editor'	s Name and	Address	Dates of payme	ent	Total amount paid	Amount you still owe	Was this p	payment for

Case 19-17387 Doc 1 Filed 05/31/19 Page 39 of 51

Case number (if known)

7.	Within 1 year before you filed for bankrupt <i>Insiders</i> include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any ger a control, or owner of 20% of	neral partners; partner or more of their voting	erships of which yog g securities; and a	ou are a general ny managing ag	partner; corporations ent, including one fo
	■ No□ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	nis payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos		ments or transfer a	any property on a	eccount of a dek	ot that benefited an
	NoYes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include credite	
Po	et A. Idontify Logal Actions Panagagasian	no and Faranlasuras	•			
Pal	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt: List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.					
	Case title	Nature of the case	Court or agency		Status of the	0350
	Case number	Nature of the case	Court or agency		Status of the	Case
10.	Within 1 year before you filed for bankrupt: Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address		erty repossessed, f	oreclosed, garni	shed, attached,	seized, or levied? Value of the
	Orealtor Name and Address			Date		property
		Explain what happened	d			
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment become No Yes. Fill in the details. Creditor Name and Address		J		n, set off any an	nounts from your Amount
				takeı	1	
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a		erty in the possess	ion of an assigne	e for the benefi	t of creditors, a
	No					
	☐ Yes					
Pai	rt 5: List Certain Gifts and Contributions					
13	Within 2 years before you filed for bankrup	otcy did you give any gift	s with a total value	of more than \$60	10 ner nerson?	
10.	■ No	noy, ala you givo ally give	o mini a total valuo	or more than per	o po. po.com.	
	☐ Yes. Fill in the details for each gift.					
	Gifts with a total value of more than \$600 per person	Describe the gifts		Date the g	s you gave lifts	Value
	Person to Whom You Gave the Gift and Address:					

Debtor 1 Angela Christine Swann

Debto	or 1 Angela Christine Swann		C	ase number (if known)	
14. W	Within 2 years before you filed for bankı ■	ruptcy, (did you give any gifts or contributions	s with a total	I value of more than	\$600 to any charity?
-	■ No☐ Yes. Fill in the details for each gift or one	oontribut	ion			
_	· ·				Datas vau	Value
	Gifts or contributions to charities that more than \$600	ioiai	Describe what you contributed		Dates you contributed	Value
	Charity's Name					
,	Address (Number, Street, City, State and ZIP Cod	le)				
Part 6	6: List Certain Losses					
	Nithin 1 year before you filed for bankru or gambling?	ıptcy or	since you filed for bankruptcy, did yo	ou lose anytl	hing because of thef	t, fire, other disaste
	■ No					
	Yes. Fill in the details.					
1	Describe the property you lost and	Descri	be any insurance coverage for the lo	SS	Date of your	Value of property
	how the loss occurred	Include	e the amount that insurance has paid. Lince claims on line 33 of Schedule A/B: H	st pending	loss	los
Part 7	7: List Certain Payments or Transfer	s				
					_	
	Nithin 1 year before you filed for bankru consulted about seeking bankruptcy or			behalf pay o	r transfer any prope	rty to anyone you
	nclude any attorneys, bankruptcy petition			vices required	in your bankruptcy.	
_	-					
_	□ No					
	Yes. Fill in the details.				_	
	Person Who Was Paid Address		Description and value of any prope transferred	erty	Date payment or transfer was	Amount o paymen
_	Email or website address		il allorer ea		made	paymen
	Person Who Made the Payment, if Not	You				
ļ	Law Office of Mary Sue Greisman 2670 Crain Hwy Ste 525		Attorney Fees-\$1,277 Filing fee-\$335		May 2019	\$1,700.00
	Waldorf, MD 20601		Credit Report-\$40			
	Marysue [®] greismanlaw.com		Admin/Office fee-\$48			
_						
	www.debtorcc.org		Money for certificate		May 28, 2019	\$14.95
	378 Summit Avenue					
•	Jersey City, NJ 07306					
_						
	Nithin 1 year before you filed for bankru promised to help you deal with your cre				r transfer any prope	rty to anyone who
	Do not include any payment or transfer tha) :		
	No					
	Yes. Fill in the details.					
	Person Who Was Paid		Description and value of any prope transferred	erty	Date payment	Amount o
,	Address		transferred		or transfer was made	paymen
40 14	Mithin Overs before very filed for bouler		did asll 4mada an athamsiaa 4mana	f		
	Nithin 2 years before you filed for bankı ransferred in the ordinary course of you			rer any prop	erty to anyone, othe	r than property
Ir	nclude both outright transfers and transfer	s made	as security (such as the granting of a se	curity interes	t or mortgage on your	property). Do not
in	nclude gifts and transfers that you have all	ready lis	ted on this statement.			
	No					
	Yes. Fill in the details.		Description of local	D"		Data (
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts	Date transfer was made
				paid in exc		
F	Person's relationship to you					

	Debtor 1	Angela	Christine	Swanr
--	----------	--------	-----------	-------

Case number (if known)

19.	Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-protein No		y property to a	self-settle	d trust or similar device	of which you are a
	Yes. Fill in the details.					
	Name of trust	Description and v	alue of the pro	perty trans	ferred	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Instr	ruments, Safe Deposit	Boxes, and St	orage Unit	s	
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated to the cooperative of the cooperati	other financial accour	nts; certificates	of deposit		
	No					
	Yes. Fill in the details.					
		ast 4 digits of account number	Type of according trument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 yearsh, or other valuables?	ar before you filed for	bankruptcy, ar	ny safe dep	oosit box or other depos	sitory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		Describe t	the contents	Do you still have it?
22.	Have you stored property in a storage unit or ☐ No ☐ Yes. Fill in the details.	place other than your	home within 1	year befor	e you filed for bankrupt	tcy?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, State and ZIP Code)		Describe f	the contents	Do you still have it?
	Mother's home			my belor extra spa such as approxin	er is holding some ongings due to lack of ace in my apartment photographs and my nate 25 doll n. The dolls are listerule B.	■ Yes
Par	t 9: Identify Property You Hold or Control fo	r Someone Else				
23.	Do you hold or control any property that some for someone.	eone else owns? Inclu	ide any proper	ty you borr	owed from, are storing	for, or hold in trust
	■ No					
	Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value

Debtor 1 Angela Christine Swann

Part 10: Give Details About Environmental Information

Case number (if known)

For	the p	ourpose of Part 10, the following definit	ions apply:			
•	toxi reg Site to o	rironmental law means any federal, static substances, wastes, or material into fulations controlling the cleanup of these means any location, facility, or propertion, operate, or utilize it, including disperardous material means anything an envardous material, pollutant, contaminant	the air, land, soil, surface water, grour e substances, wastes, or material. ty as defined under any environmenta osal sites. vironmental law defines as a hazardou	ndwa	ter, or other medium, including sta	atutes or or utilize it or used
Rep	ort a	II notices, releases, and proceedings th	nat you know about, regardless of whe	n the	ey occurred.	
24.	Has	any governmental unit notified you that	nt you may be liable or potentially liabl	e un	der or in violation of an environme	ntal law?
	■ □ Na	No Yes. Fill in the details. me of site	Governmental unit		Environmental law, if you	Date of notice
	Ad	dress (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State a ZIP Code)	nd	know it	
25.	Have you notified any governmental unit of any release of hazardous material? ■ No □ Yes. Fill in the details.					
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	nd	Environmental law, if you know it	Date of notice
26.	Hav	e you been a party in any judicial or ad	ministrative proceeding under any en	viron	mental law? Include settlements a	nd orders.
		No Yes. Fill in the details.				
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case
Par	t 11:	Give Details About Your Business or	Connections to Any Business			
27.	Wit	hin 4 years before you filed for bankrup	tcv. did vou own a business or have a	nv o	f the following connections to any	business?
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time					
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)					
		☐ A partner in a partnership				
		☐ An officer, director, or managing ex	ecutive of a corporation			
		☐ An owner of at least 5% of the votin	ng or equity securities of a corporation	1		
		No. None of the above applies. Go to	Part 12.			
		Yes. Check all that apply above and fil	I in the details below for each busines	ss.		
		siness Name dress	Describe the nature of the business		Employer Identification number Do not include Social Security r	

Name of accountant or bookkeeper

(Number, Street, City, State and ZIP Code)

Dates business existed

Case 19-17387 Doc 1 Filed 05/31/19 Page 43 of 51

Debte	or 1 Angela Christine Swann	Case number (if known)	
	Within 2 years before you filed for bankrup nstitutions, creditors, or other parties.	Date Issued Inancial Affairs and any attachments, and I declare under penalty of perjury that the answers a false statement, concealing property, or obtaining money or property by fraud in connection \$250,000, or imprisonment for up to 20 years, or both. Signature of Debtor 2 Date Dete Dete Dete	
I [■ No □ Yes. Fill in the details below.		
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Part	12: Sign Below		
are tro	ue and correct. I understand that making a		
/s/ A	ngela Christine Swann		
	ela Christine Swann ature of Debtor 1	Signature of Debtor 2	
Date	May 31, 2019		
Did yo	ou attach additional pages to Your Statem	nent of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?	
■ No			
☐ Ye	s		
Did yo	ou pay or agree to pay someone who is no	ot an attorney to help you fill out bankruptcy forms?	
■ No		• • •	

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court District of Maryland

		J		
n re	Angela Christine Swann		Case No.	
		Debtor(s)	Chapter	7
	VER	IFICATION OF CREDITOR N	MATRIX	
1	I Delverte de la circa	der de san de la lance de la lance de la companya d		Ch' de la la la la
ie ab	ove-named Debtor hereby vermes	that the attached list of creditors is true and co	frect to the best	of his/her knowledge.
ate:	May 31, 2019	/s/ Angela Christine Swann		
		Angela Christine Swann		
		Signature of Debtor		

Internal Revenue Service Centralized Insolvency Operation Post Office Box 7346 Philadelphia, PA 19101-7346

Comptroller of Maryland 301 W Preston St Room 409 Baltimore, MD 21201

Abberly Square Apartments 2350 Edenwoods Dr Waldorf, MD 20601

Allied Collection Services Attn: Bankruptcy 3080 South Durango Drive Suite 208 Las Vegas, NV 89117

Bank of America Attn: Bankruptcy Po Box 982238 El Paso, TX 79998

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Comcast Corporation Comcast Center-Company HQ 1701 JFK Blvd Philadelphia, PA 19103

Comcast Corporation (Xfinity Mobile) Comcast Center-Company HQ 1701 JFK Blvd Philadelphia, PA 19103 Comenity Bank/Overstock Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

Comenity Bank/Victoria Secret Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

Comenity Jared POB 182125 Columbus, OH 43218

Comenity OverStock POB 182125 Columbus, OH 43218

Comenity Pink POB 182125 Columbus, OH 43218

Comenitybank/Jared Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218

Diversified Ajustment 600 Coon Rapids Blvd Minneapolis, MN 55433

Mr. Cooper 8950 Cypress Waters Blvd Coppell, TX 75019

Neibauer Dental Care-Waldorf 117 St. Patricks Drive Waldorf, MD 20603 Nelnet Attn: Claims Po Box 82505 Lincoln, NE 68501

Paul Swann P.O. Box 47 Hughesville, MD 20637

Sprint Headquarters 6200 Sprint Parkway Overland Park, KS 66251

Synchrony Bank/Care Credit Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Wells Fargo Bank NA Attn: Bankruptcy 1 Home Campus Mac X2303-01a Des Moines, IA 50328

Williamsburg Plantation TimeShare 4870 Longhill Rd Williamsburg, VA 23188